

MAILING ADDRESS FOR SAN FRANCISCO OFFICE:

555 CORPORATE DRIVE, SUITE 205 LADERA RANCH, CA 92694 PHONE: 855-396-1220

FAX: 415-278-9744

PHYSICAL LOCATION - DO NOT SEND MAIL: 201 Spear Street, Suite 1100 San Francisco, CA 94105

> WRITER'S EMAIL: aolson@ccmpt.com

WWW.CCMPT.COM

ORANGE COUNTY LOS ANGELES

SAN FRANCISCO

SACRAMENTO

FRESNO

February 10, 2021

Ray Tadjbakhsh, Esq. Pacific Workers' Compensation Law Center 333 Hegenberger Road, Suite 504 Oakland, CA 94621

Re:

Alexander Rivera Romero v. BBSI/C&B Delivery Service

WCAB No:

ADJ13212435, ADJ13727379

Claim No:

BB-20-001442, BB-20-004911

Dear Mr. Tadibakhsh:

It has been a pleasure working with you to move this case towards resolution. As Mr. Kingscott indicated in his email of February 10, we are extending an offer of \$50,000.00 for a joint Compromise and Release. Please do note that however that I need to confirm authority with my client for our share of the settlement, but I do not see that being an issue at this amount.

If we are not able to resolve this matter in the next couple of weeks, let me know if there are any issues with authorization of the treating physician and I will follow up on that. Once again, please make sure that you have updated your file to reflect that Colantoni Collins represents CorVel and ACE American Insurance Company for the employer BBSI, who handled Workers' Compensation coverage for C&B Delivery Service for this Applicant on March 6, 2020.

Mr. Kingscott with Coleman Chavez represents Benchmark Insurance who appears to be the carrier for C&B Delivery.

It appears your client is working for/with the same individuals, but his technical employer changed from BBSI to C&B Delivery. This is not the same as an employer changing Workers' Compensation carriers, and your client actually has an entirely new employer. Nonetheless, I do believe we can consider a global settlement, if we can reach an agreement on figures.

Kindest Regards,

COLANTONI, COLLINS, MARREN, PHILLIPS & TULK, LLP

AMY E. OLSON

AEO/mg

Minutes of Hearing

Enc.: CC:

Marty Lynn/CorVel Corporation (Via Email Only)

bbsi@corvel.com

Brent Hudgins/BBSI (Via Email Only)



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FRESNO

February 8, 2021

Adam Stoller, M.D. 1900 O'Farrell St., Ste. #190 San Mateo, CA 94403

Re:

Jonathan Shockley v. Biotelemetry, Inc. dba Cardionet, LLC

WCAB No:

ADJ12031731

Claim No:

040519008736

Dear Dr. Stoller:

Thank you for agreeing to evaluate the above-named Applicant in the capacity of a Panel Qualified Medical Examiner in your San Francisco office on **March 11**, **2021** at **11:30 a.m.**

Please be advised this correspondence is being sent to you as a defense interrogatory on behalf of Defendants, Biotelemetry, Inc. dba Cardionet, LLC: administered by Chubb Idemnity Insurance Company.

Please allow this correspondence to serve as authorization for you to perform any diagnostic testing which you believe is necessary in order for you to complete your evaluation of Applicant.

If Applicant has achieved Maximum Medical Improvement, please discuss with him the possibility of returning to work. If the Applicant is not able to return to his usual and customary occupation, please complete the attached voucher form and provide a copy to the injured worker before he leaves your office.

Background Information

Thank you for your ongoing assistance with this claim. You last evaluated the Applicant on January 23, 2020, and you have issued several interim supplemental reports.

Subsequent to your last visit, Applicant was seen by Dr. Leonard Gordon for a surgical consultation for the bilateral upper extremities. Dr. Gordon notes that Mr. Shockley appears to have repetitive stress as far as his upper extremities are concerned. However, Dr. Gordon finds

February 8, 2021

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no evidence for nerve entrapment, despite the electro-diagnostic studies showing cubital tunnel syndrome in both elbows.

He notes that there is a question of a nerve problem in the neck and possible radiculopathy, although the radiculopathy was at the C6-7 level and Applicant's symptoms of cubital tunnel and ulnar side of the hand primarily would be at C8 through T1, but he does defer to the orthopedic specialist for further comment regarding the neck. As far as the upper extremities and cubital tunnel, he does not feel that there are any surgical options that would be helpful at this time.

Applicant has now been approved for a surgical consult to the neck. We are still awaiting that report.

If it turns out that Applicant is not surgical for the neck, do you find him at Maximum Medical Improvement?

If so, please comment on the Applicant's Permanent and Stationary status and Whole Person Impairment in the event that he is not surgical or declines.

Inquiries

It is requested that you kindly carefully review the enclosed pleadings, and medical reports and incorporate same into your forthcoming report. Additionally, it is requested you comment upon Applicant's current medical status, including whether she has reached Maximum Medical Improvement in addition to addressing the issue of apportionment.

Kindly ensure your report addresses the American Medical Association Guides to the Evaluation of Permanent Impairment, 5th Edition, guides in writing your report. Also, please ensure that you include the corresponding Whole Person Impairment (WPI) rating.

It is requested that your report cover the following:

- 1. A detailed medical history
 - Your diagnosis
- 3. Whether or not the medical findings are consistent with the original incident or injury(ies) claimed by the Applicant.
- 4. Whether or not any further medical treatment is reasonably necessary to cure or relieve the effects of the injury(ies).
 - 5. If disability exists, is it industrially caused or aggravated?
- a) If disability exists, is it the result of a specific incident or incidents or is it the result of one or more periods of cumulative trauma. If disability is a result, either in whole or in part, of one or more periods of cumulative trauma, please state your opinion when each period commenced and ended.

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- b) If disability exists, was there a precipitating cause of all or part of this disability?
- 6. IF THE DISABILITY IS INDUSTRIALLY CAUSED OR AGGRAVATED, IS IT:
 - A) TEMPORARY TOTAL?
- B) TEMPORARY PARTIAL? IF SO, GIVE EXTENT OF ABILITY TO WORK.
- C) WHEN WAS APPLICANT NO LONGER TEMPORARILY DISABLED?
 - 7. If permanent and stationary and ready for rating, describe:

Permanent disability factors resulting from the industrial causation or aggravation. If you believe the Applicant should be restricted in job duties, please set forth with as much specificity as possible, those restrictions.

- b) Whether there should be apportionment to non-industrial factors. If you believe there should be apportionment, please provide a discussion on this subject.
- 1. Factors, if any, which you believe pre-existed and are unrelated to, and not aggravated by, the industrial exposure.
- 2. Was there a pre-existing condition which did interfere or would have actually interfered with any type of work activity? If you find a pre-existing non-industrial condition, please set forth with specificity the condition and the percentage of disability or impairment in the open labor market which Applicant has independent of the industrial injury.
- 3. The extent of the disability due to the natural progression of pre-existing factors which has resulted in symptoms or disability independent of employment. Please state the percentage of disability due to industrial factors and the percentage due to any pre-existing disability or any disability due to the natural progression of pre-existing factors.

Pursuant to recent changes to L.C. §4663, apportionment of permanent disability shall be based on <u>causation</u>. Any physician preparing reports on the issue of permanent disability must address the issue of causation. The physician must make an apportionment determination by finding what approximate percentage of the permanent disability was caused as a direct result of the work-related injury and what portion was caused by other factors, including prior industrial injuries or other non-industrial factors.

Pursuant to L.C. §4664, if an injured worker has received a prior award of permanent disability, it shall be conclusively presumed that the prior permanent disability exists at the time of any subsequent industrial injury.

Based on the foregoing, please indicate what the approximate percentage of Applicant's current disability is due to the industrial injuries alleged in this case and what percentage is due to a) any

February 8, 2021

Page 4

previous industrial injuries; b) any subsequent industrial injuries; and c) any non-industrial injuries, illnesses or pathology. Please provide a basis for any apportionment you give in your report.

- 8. Based upon your evaluation and disability determination, please state whether you believe the Applicant is capable of returning to his usual and customary employment activities.
- 9. Please discuss whether the treatment provided to date, or the treatment you are currently recommending, is reasonable and necessary to cure or relieve the effects of the industrial injury in compliance with the ACOEM guidelines, which includes the extent and scope of medical treatment rendered.

Recently enacted legislation (SB228) adopted evidence-based medicine (EBM) guidelines and the acceptance of the ACOEM guidelines as presumptively correct. The ACOEM guidelines promote "conservative care."

Please draft your report pursuant to the guidelines of the American Medical Association.

Please forward an original of your report to the Workers' Compensation Appeals Board, with copies to the attorneys for the parties. Your bill for services is to be sent to: Colantoni, Collins, Marren, Phillips & Tulk, LLP, Attn: Amy E. Olson, Esq., 555 Corporate Dr., Ste. #205, Ladera Ranch, CA 92694.

Your efforts in sending your report at your earliest convenience will be greatly appreciated.

Kindest Regards,

COLANTONI, COLLINS, MARREN, PHILLIPS & TULK, LLP

AMY E. OLSON

AEO/mg

Enc.: Schedule of Records

cc: Mario Castro/Chubb Group of Insurance Companies (Via Email Only)

Zachary Kweller, Esq./Pacific Workers Oakland

February 8, 2021

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SCHEDULE OF RECORDS

Description

2019.02.19 - DWC-1 Claim Form

- 2020.12.10- Primary Treating Physicians Progress Report Babak Jamasbi MD
- 2020.12.08- Prescription Acupuncture
- 2020.12.03- Med Legal Supplemental Report Adam Stoller MD
- 2020.12.03- Supplemental Report Babak Jamasbi MD
- 2020.11.06- Primary Treating Physicians Progress Report Babak Jamasbi MD
- 2020.11.06- Primary Treating Physicians Progress Report Julia Fellows PA-C
- 2020.09.25- Primary Treating Physicians Progress Report Babak Jamasbi MD
- 2020.09.20- Med Legal Supplemental Report Adam Stoller MD
- 2020.09.11- Prescription Aquatic Therapy
- 2020.09.04- Primary Treating Physicians Progress Report Jessica Aikin PA-C
- 2020.09.04- Primary Treating Physicians Progress Report Babak Jamasbi MD
- 2020.08.07- Primary Treating Physicians Progress Report Jessica Aikin PA-C
- 2020.07.22- Orthopedic Hand Surgery Consultation Leonard Gordon MD
- 2020.07.14- Prescription Acupuncture
- 2020.07.10- Primary Treating Physicians Progress Report Jessica Aikin PA-C
- 2020.06.19- Medical Report
- 2020.06.17- SOAP Notes Andreas Schwerte OMD
- 2020.06.12- Primary Treating Physicians Progress Report Babak Jamasbi MD
- 2020.05.29- Primary Treating Physicians Progress Report Babak Jamasbi MD
- 2020.04.24- Primary Treating Physicians Progress Report Babak Jamasbi MD
- 2020.04.03- MRI Report Cervical Spine w/o Contrast Jennifer Lin M.D
- 2020.04.01- Prescription Cervical Spine MRI
- 2020.03.25- Primary Treating Physicians Progress Report Julia Fellows PA-C
- 2020.03.25- Visit Note Pain & Rehabilitative Babak Jamasbi M.D.
- 2020.03.11- SOAP Notes Andreas Schwerte O.M.D.
- 2020.02.26- Primary Treating Physicians Progress Report Julia Fellows PA-C
- 2020.02.26- Visit Note Pain & Rehabilitative Babak Jamasbi M.D
- 2020.02.10- EMG Report -Dr. Neeti Bathia
- 2020.01.15- Visit Note -Dr. Babak Jamasbi
- 2020.01.10- Primary Treating Physicians Progress Report Jessica Aikin PA-C
- 2020.01.10- Visit Note -Dr. Babak Jamasbi
- 2019.11.22- Primary Treating Physicians Progress Report Babak Jamasbi MD
- 2019.11.05- SOAP Notes -Andreas Schwerte, O.M.D
- 2019.10.21 Medical Report Jamasbi MD
- 2019.08.05 Daily Note Dr Annie Ting
- 2019.05.29 Daily Note Golden Gate Hand Therapy
- 2019.05.28 P&S Report Patrick O'Lang MD
- 2019.05.22 Medical Report Dr Annie Ting
- 2019.05.15 Medical Report Dr Crystal Wong
- 2019.05.14 Medical Report Patrick O'Lang MD
- 2019.05.10 Daily Note Annie Ting

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2019.05.03 - Medical Report - Dr Crystal Wong
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2019.05.02 - Work Status Report - Patrick O Lang MD

2019.04.24 - Daily Note - Dr Annie Ting

2019.04.22 - Medical Report - Dr Crystal Wong

2019.04.17 - Daily Note - Golden Gate Hand Therapy

2019.04.16 - Primary Treating Physician (PR-2) - Patrick O'Lang MD

2019.04.16 - Work Abilities Worksheet

2019.04.15 - Daily Note - Medical Report

2019.04.10 - Medical Report - Dr Annie Ting

2019.04.08 - Daily Note - Golden Gate Hand Therapy

2019.04.03 - Daily Note - Golden Gate Hand Therapy

2019.04.01 - Medical Report - Dr Annie Ting

2019.03.27 - Daily Note - Golden Gate Hand Therapy

2019.03.27 - Daily Note - Mary Naughton

2019.03.25 - Daily Note - Annie Ting

2019.03.20 - Daily Note - Golden Gate Hand Therapy

2019.03.20 - Daily Note - Dr Annie Ting

2019.03.18 - Daily Note - Golden Gate Hand Therapy

2019.03.18 - Occupational Therapy - Dr Annie Ting

2019.03.01 - Hand Surgery Consult - O'Lang MD

2019.03.01 - Hand Surgery - Patrick O'Lang MD

2019.03.01 - Rx - Patrick O'Lang MD

2018.02.15 - Medical Report - Dr Annie Ting

2016.04.16 - Medical Report - O'Lang MD

2019.10.10 – Applicat's Deposition Transcript



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SACRAMENTO

FRESNO

February 10, 2021

Viviana Santiago, Esq. Pacific Workers Oakland 333 Hegenberger Rd, Ste 504 Oakland, CA 94621

Re: Dond

Dondrea Ray v. Tesla Motors, Inc.

WCAB No:

ADJ12904552

Claim No:

2230418901

Dear Ms. Santiago:

You requested a copy of the benefit printouts in this claim. I have also attached a copy of the updated medical records. It has now been almost a year since your client was last evaluated by the QME and I am going to get a re-evaluation on the books about five months out, to allow time to recover from her right-side carpal tunnel decompression surgery. However, if your client has a settlement demand, or if decides against surgery, please let me know. If that ends up not going forward for whatever reason, we can push the examination up. If she has significant complications or delays with her surgery, please let me know.

Kindest Regards,

COLANTONI, COLLINS, MARREN, PHILLIPS & TULK, LLP

BY:

AMY E. OLSON

AEO/mg

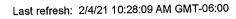
cc: Emma Fleder/Zurich North America (Via Email Only)

Elyse Bernstein/Zurich North America (Via Email Only)

Amir Sharifi/Tesla Motors, Inc. (Via Email Only) Elena Martin/Tesla Motors, Inc. (Via Email Only)

Jordan Hetherington/Tesla Motors, Inc. (Via Email Only)

usz.zurich.claims.documents@zurichna.com



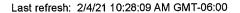


ZURICH NORTH AMERICA - CLAIMS -Indemnity Paid Report Between and

Claim Number: 2230418901

Ray Dondrea

	2019	2020	2021	Sum:
40TTD	\$1,194.78	\$26,114.47	\$2,389.56	\$29,698.81
Sum:	\$1,194.78	\$26,114.47	\$2,389.56	\$29,698.81

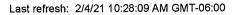




ZURICH NORTH AMERICA - CLAIMS -Indemnity Paid Report Between and

Claim Number: 2230418901

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	Dondrea Ray	20200102	20191221	20200103	\$1,194.78
	Dondrea Ray	20200116	20200104	20200117	\$1,194.78
	Dondrea Ray	20200130	20200118	20200131	\$1,194.78
	Dondrea Ray	20200213	20200201	20200214	\$1,194.78
	Dondrea Ray	20200227	20200215	20200228	\$1,194.78
	Dondrea Ray	20200312	20200229	20200313	\$1,194.78
	Dondrea Ray	20200326	20200314	20200327	\$1,194.78
	Dondrea Ray	20200409	20200328	20200410	\$1,194.78
	Dondrea Ray	20200423	20200411	20200424	\$1,194.78
	Dondrea Ray	20200507	20200425	20200508	\$1,194.7
	Dondrea Ray	20200521	20200509	20200522	\$1,194.7
	Dondrea Ray	20200604	20200523	20200605	\$1,194.7
	Dondrea Ray	20200618	20200606	20200617	\$1,024.0
	Dondrea Ray	20200903	20200824	20200906	\$1,194.7
	Dondrea Ray	20200917	20200907	20200920	\$1,194.7
	Dondrea Ray	20201001	20200921	20201004	\$1,194.7
	Dondrea Ray	20201015	20201005	20201018	\$1,194.7





	Dondrea Ray	20201103	20201019	20201101	\$1,194.78
	Dondrea Ray	20201118	20201102	20201115	\$1,194.78
	Dondrea Ray	20201124	20201116	20201129	\$1,194.78
	Dondrea Ray	20201210	20201130	20201213	\$1,194.78
	Dondrea Ray	20201223	20201214	20201227	\$1,194.78
	Dondrea Ray	20210107	20201228	20210110	\$1,194.78
	Dondrea Ray	20210121	20210111	20210124	\$1,194.78
40TTD					\$29,698.81

Sum:	\$29,698.81
Avg:	\$1,187.95

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	Dondrea Ray	20200604	20200605	20200604	20200523	20200605	00004010005360	v	\$1,194.78
	Dondrea Ray	20200618	20200619	20200618	20200606	20200617	00004010005471	ပ	\$1,024.09
	Dondrea Ray	20200903	20200904	20200903	20200824	20200906	00004010006100	v	\$1,194.78
	Dondrea Ray	20200917	20200918	20200917	20200907	20200920	00004010006201	U	\$1,194.78
	Dondrea Ray	20201001	20201002	20201001	20200921	20201004	00004010006312	U	\$1,194.78
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	Dondrea Ray	20201103	20201104	20201103	20201019	20201101	00004010006563	ပ	\$1,194.78
	Dondrea Ray	20201118	20201119	20201118	20201102	20201115	00004010006697	U	\$1,194.78
	Dondrea Ray	20201124	20201125	20201124	20201116	20201129	00004010006781	U	\$1,194.78
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	Dondrea Ray	20210107	20210108	20210107	20201228	20210110	00004010007183	U	\$1,194.78
	Dondrea Ray	20210121	20210122	20210121	20210111	20210124	00004010007336	Ų	\$1,194.78
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